

(Rev. 5-2001)

APPLICATION TRANSFER REQUEST FOR

Section I. TRANSFER REQUEST BY (PRINT NAME) Caster

Date _____

TO: 3726 29/700+FROM: A.U. 3764 Class 604

REASON:

Removing a needle cannula from an attachment structure

Hand carried: Personally accepted by _____

Section II a. DISPOSITION BY RECEIVING TC By: _____

A.U. _____

Date _____

☐ ACCEPTED BY RECEIVING T.C.

NOT ACCEPTED

☐ Non-classification issue/other, return to Originating TC/AU _____

REASON:

Section II b. DISPOSITION BY RECEIVING TC POST CLASSIFIER

☐ This dispute was resolved. Forward to

Concurring _____ Date _____

☐ This dispute was not resolved, forward to DISPUTE RESOLUTION PANEL

Post Classifier Assessment:

Post Classifier _____

Section III. DISPOSITION BY DISPUTE RESOLUTION PANEL

Date _____

Panel Decision:

REASON:

Panel Member _____

Concurring Panel Member _____

☐ This application MAY NOT be returned to the dispute resolution panel. THIS IS A FINAL DISPOSITION.